HIGH POINT UNIVERSITY
THE PREMIER LIFE SKILLS UNIVERISTY
Office of The University Registrar

ADD/DROP FORM

Semester (circle one)

FALL	SPRING	SUMMER I	SUMMER II	ONLINE

STUDENT	ADVISOR
NAME	NAME
ID#	Advisor Signature Required
signature	
DATE	DATE

Check ALL That Apply
(If none apply, leave blank)

☐ Receiving Veterans (VA) Benefits ☐ NCAA Student Athlete

INSTRUCTOR USE ONLY

A =Add D = Drop W =Withdraw	Course PREFIX (Ex. Bio)	Course NUMBER (Ex. 1100)	Course SECTION (Ex. 01)	Credit HOURS (Ex. 1-4)	RESTRICTIONS OVERRIDE?	CLOSED ADD STUDENT?	Course SECTION RESTRICTIONS (prerequisites, major, class capacity, level, etc...) *WAITLISTED class sections CANNOT be overridden*		
A D W					yes/no	yes/no	signature /	print name /	date
A D W					yes/no	yes/no	signature /	print name /	date
A D W					yes/no	yes/no	signature /	print name /	date
A D W					yes/no	yes/no	signature /	print name /	date

Academic Dean *only required in excess of 18 hours*	signature /	print name /	date
Student Life *only required if dropping below 12 hours*	signature /	print name /	date
Financial Planning *only required if dropping below 12 hours*	signature /	print name /	date
Office of the University Registrar (office use only)	signature /	print name /	date
	credit hours registered	before:	after: